Joint Committee on Corrections

Information for Legislative Institutional Visits

Facility Name: Ozark Correctional Center			
Custody Level	C1	Warden	Ed Davis
Total Acreage	80	Address	929 Honor Camp Lane
Acreage w/in Perimeter	12		Fordland, MO 65652
Square Footage	166,185	Telephone:	417-767-4491
Year Opened	1963	Fax:	417-767-2014
Operational Capacity/Count (as of December 20, 2013)	738/674		
General Population Beds (capacity and count as of December 20, 2013)	88/24	Deputy Warden	Offender Management Stacy Kleier
Segregation Beds (capacity and count as of December 20, 2013)	16/6	Deputy Warden	Operations Brian O'Connell
Treatment Beds (capacity and count as of December 20, 2013)	650/650	Asst. Warden	N/A
Work Cadre Beds (capacity and count as of December 20, 2013)	0	Asst. Warden	N/A
Diagnostic Beds (capacity and count as of December 20, 2013)	0	Major	Johnny Burkdoll
Protective Custody Beds (capacity and count as of December 20, 2013)	0		

1. Capital Improvement Needs:

- a. How would you rate the overall condition of the physical plant of the institution? OCC is an older facility, but its condition would be considered good overall, with a few areas poor to fair. Steady improvements have been made to the infrastructure and buildings over the years. Two of the areas that were mentioned in our last report have been addressed, as we have replaced our radio system and have expanded/upgraded our wastewater treatment plant. Our perimeter security has also been significantly enhanced through the recent replacement of our perimeter fence detection system.
- b. What capital improvement projects do you foresee at this facility over the next six years? Electrical service to our institution and throughout our buildings is insufficient for modern business use. Our service pre-dates computers, video and most common modern business use. All buildings, including the offender housing units, are at/near the maximum on circuits used and panel boxes. We are also susceptible to power spikes and lightning. A thorough electrical needs audit should be performed and our service upgraded accordingly.

We have four double-wide trailers used for drug treatment services that are badly in need of replacement. Two of the trailers are used for treatment staff office space, and the other two are used as offender programming space (which is always at a premium). These trailers are 18-20 years old, and were not made to withstand this type of use. Considering the age and condition of the trailers, repairs (though necessary) are not a very effective use of funds. Ideally these trailers would be replaced with a permanent building(s), but new trailers would be an acceptable and less-costly solution.

Replacement of exterior doors and windows is another area that needs attention. Our older buildings have single-paned windows in them, which are very inefficient and make it difficult to maintain a comfortable working environment for staff with offices in these areas (hot in the summer and cold in the winter). Metal exterior doors rust and warp over time, and we have several throughout the facility that need to be replaced.

We also will need to repair and possibly re-asphalt the entry road to the facility and the perimeter road at some point in the future.

c. How critical do you believe those projects are to the long-term sustainability of this facility? The upgrades that we have received in the last few years (as noted above in 1.a.) were critical to the institution's long-term sustainability and indicate the department's commitment to OCC. As a dedicated drug treatment facility, treatment space is essential to accomplishing our mission, so we definitely need to look at some infrastructure improvements to support that. Though we can maintain for a while with the programming facilities we have, they are certainly inadequate and not worth putting much money into. Improvements to the electrical system are needed for the betterment of institutional operations, but are not currently at a critical point as far as our sustainability. The other areas noted above do need to be addressed, but we can continue to make improvements in a piecemeal basis if funding for larger projects are not available.

2. Staffing:

- a. Do you have any critical staff shortages?
 - We do not have any critical staff shortages, we have been fortunate to fill positions as they come available.
- b. What is your average vacancy rate for all staff and for custody staff only? 5% for All Staff and 1-2 % Custody
- c. Does staff accrual or usage of comp-time by staff effect your management of the institution? No because comp-time is being managed.
- d. What is the process for assigning overtime to staff?
 - We do not have a lot of overtime, but if the need arises we have a log that is seniority based on volunteers for overtime.
- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off? 80 % time off and 20% paid off
- f. Is staff able to utilize accrued comp-time when they choose?

 Non-custody staff is required to flex comp time if at all possible the week they earn it. Custody staff also tries to flex any time gained if at all possible that same week if the schedule allows it. Otherwise they submit a request for use of the comp time and the supervisor grants it if the schedule allows it.

3. Education Services:

- a. How many (and %) of inmate students at this institution are currently enrolled in school?

 168 students/ approximately 25 % of OCC Population
- b. How many (and %) of inmate students earn their GED each year in this institution? Approximately 70 per year/ 20 %
- c. What are some of the problems faced by offenders who enroll in education programs? Long term drug/alcohol abuse, History of failure in Academics (especially non-readers) Poor Economic Backgrounds, Poor Attitudes and Poor Testing Skills.

4. Substance Abuse Services:

a. What substance abuse treatment or education programs does this institution have?

OCC operates a Modified Therapeutic Community Program. In 2013, we introduced the Collegiate Model as an adjunct to the TC Model, which provides increased engagement, empowerment, and individualization of services for the clients. The Collegiate Model utilizes a college type scheduling format, offering both required and elective courses. Clients, in collaboration with their counselor, create an individualized schedule built around other responsibilities.

- b. How many beds are allocated to those programs?
 - OCC has 650 allocated treatment beds
- c. How many offenders do those programs serve each year?
 - The program is one year in length, with a small number of clients assigned to a two year sentence. We usually operated at near maximum capacity and so serve 650 offenders per year.
- d. What percent of offenders successfully complete those programs?
 - Most recent data indicates a 95% completion rate
- e. What, in you opinion, is the biggest challenge to running a treatment program in a prison setting? The primary challenges are related to conflicts between the facility's need for offender workers for facility operations and maintenance and the need of offender availability for treatment services.

5. Vocational Programs: DOES NOT APPLY TO OCC

- a. What types of vocational education programs are offered at this institution?
- b. How many offenders (and %) participate in these programs each year?
- c. Do the programs lead to the award of a certificate?
- d. Do you offer any training related to computer skills?

6. Missouri Vocational Enterprises: <u>DOES NOT APPLY TO OCC</u>

- a. What products are manufactured at this institution?
- b. How many (and %) of offenders work for MVE at this site?
- c. Who are the customers for those products?
- d. What skills are the offenders gaining to help them when released back to the community?

7. Medical Health Services:

- a. Is the facility accredited by the National Commission on Correctional Health Care? Yes
- b. How many offenders are seen in chronic care clinics?
 - 465 offenders enrolled in 14 different clinics
- c. What are some examples of common medical conditions seen in the medical unit? rashes, muscle strains, headaches, common colds
- d. What are you doing to provide health education to offenders? **protocol handouts and additional information given during sick call**
- e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond? No
- f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain
 - Yes, the chronic care clinics are growing and the offenders have bodies that are older than there years, due to abuse and neglect.

8. Mental Health Services:

- a. How do offenders go about obtaining mental health treatment services?

 Offenders submit a MSR (Medical Service Request form) to request a mental health session. Offenders who take psychiatric medications are automatically seen on a monthly base.
- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides? Zero successful suicides. Staff training on suicide prevention is facilitated by licensed mental health staff. All statements of self harm are taken seriously; mental health staff is notified and an evaluation is conducted.
- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications? 83 offenders are on medication which is 11% of the maximum population.

- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?

 96 offenders are considered chronically/seriously mental ill. They are enrolled in mental health chronic care and are seen by licensed staff at least monthly.
- 9. What is your greatest challenge in managing this institution?

Limited budget for upkeep of an older facility, and the lack of adequate space for programming that is required under our contract with the Gateway Foundation.

10. What is your greatest asset to assist you in managing this institution?

We are very fortunate to have been able to recruit and retain exceptional staff, especially supervisory staff. All OCC staff are committed to the mission of long-term treatment, and to the therapeutic community model.

- 11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?) **High mileage; fair to good condition**
- 12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. (**Please have the Major answer**) Medium, talking with staff their concerns are with lack of raises and high cost of medical insurance.

13. Caseworkers:

- A. How many caseworkers are assigned to this institution?

 We have nine total positions (8 CCM I/II with one serving as Grievance Officer and 1 CCA)
- B. Do you currently have any caseworker vacancies?
- C. Do the caseworkers accumulate comp-time? Rarely
- D. Do the caseworkers at this institution work alternative schedules? Yes, some work 10 hour shift
- E. How do inmates gain access to meet with caseworkers?

Open door policy and by appointment

- F. Average caseload size per caseworker? 92
 - # of disciplinary hearings per month? 49
 - # of IRR's and grievances per month? 21 IRR's and 5 Grievances
 - # of transfers written per month?
 - # of re-classification analysis (RCA's) per month? 30 per Casemanager
- G. Are there any services that you believe caseworkers should be providing, but are not providing? **No**
- H. If so, what are the barriers that prevent caseworkers from delivering these services?
- I. What type of inmate programs/classes are the caseworkers at this institution involved in? Work Release, Community Work Projects, Pathway to Change
- J. What other duties are assigned to caseworkers at this institution?

 Back-up to Custody in the Housing Units, help count, help search, Supervise Community Work Crews, daily wing inspections, provide notary services, Birth Certificates and State ID cards.

14. Institutional Probation and Parole officers:

- A. How many parole officers are assigned to this institution? 3
- B. Do you currently have any staff shortages? 1 clerical (interviews on Jan. 9, 2014)
- C. Do the parole officers accumulate comp-time?
- D. Do the parole officers at this institution flex their time, work alternative schedules? Flex

- E. How do inmates gain access to meet with parole officers? Scheduled office hours/or request
- F. Average caseload size per parole officer?

- 1 2
- # of pre-parole hearing reports per month?
- # of community placement reports per month? 1
- # of investigation requests per month?
- 3 4
- G. Are there any services that you believe parole officers should be providing, but are not providing?
- H. If so, what are the barriers that prevent officers from delivering these services? N/A
- I. What type of inmate programs/classes are the parole officers at this institution involved in? **Anger Management and Orientation**
- 15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections. No others at this time.
- 16. Does your institution have saturation housing? If so, how many beds? Yes, 14 beds

17. Radio/Battery Needs:

- a. What is the number of radios in working condition? 188
- b. Do you have an adequate supply of batteries with a good life expectancy? Yes
- c. Are the conditioners/rechargers in good working order? Yes